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Applicati n Number

First Named Inventor POWER OF ATTORNEY OR INHIBITION OF FARNESYLTRANSFERASE **ACTIVITY IN PLANTS** Title **AUTHORIZATION OF AGENT** unassigned **Group Art Unit** unassigned **Examiner Name** 19452A-000210US Attorney Docket Number I hereby appoint: Place Customer ☑ Practitioners at Customer Number 20350 Number Bar Code Label here ☐ Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: ☐ The above-mentioned Customer Number. Practitioners at Customer Number Firm or Individual Name Address Address ZIP State City Country Fax Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record rirectør UCSD Technolgy Transfer Name Alan Paau Signature 9/12/01 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. forms are submitted. ↑ *Total of

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